

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin-top: 10px;">(to be used for all correspondence after initial filing)</p>	Application Number	10/042,421
	Filing Date	October 18, 2001
	First Named Inventor	Robert Sackstein
	Art Unit	1644
	Examiner Name	P. Gambel
	Attorney Docket Number	36459-501001US
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Notice of Allowance, Issue Fee Transmittal, and Application for Patent Term Adjustment.
<div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px; margin-bottom: 5px;"></div> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MINTZ LEVIN COHN FERRIS GLOVSKY AND POPEO, P.C.		
Signature	/Cynthia Kozakiewicz /		
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